

TRANSMITTAL FORM

to be used for all correspondence after initial filing)

TRANSMITTAL FORM to be used for all correspondence after initial filing)		Application Number	10/731,279
		Filing Date	December 8, 2003
		First Named Inventor	Pan, Philip
		Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	5 with 15 references	Attorney Docket Number	015114-068000US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement with PTO/SB/08B (3pgs) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): this PTO/SB/21 Transmittal Form (1pg) Copies of 15 cited references Return Postcard (1pg)
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Townsend and Townsend and Crew LLP	
	Steven Cahill	Reg. No. 44,578
Signature		
Date	March 4, 2004	

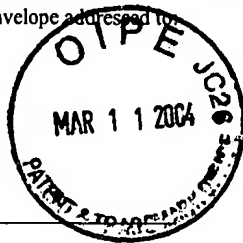
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Typed or printed name	DJ Bogorodsky		
Signature		Date	March 4, 2004

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PATENT
Attorney Docket No.: 015114-068000US
Client Reference No.: A1041

On March 4, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: DJ Bogorodsky

DJ Bogorodsky

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Philip Pan et al.

Application No.: 10/731,279

Filed: December 8, 2003

For: TECHNIQUES FOR
IMPLEMENTING ADDRESS
RECYCLING IN MEMORY CIRCUITS

Customer No. 26059

Confirmation No.

Examiner:

Art Unit:

INFORMATION DISCLOSURE
STATEMENT UNDER 37 CFR §1.97 and
§1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

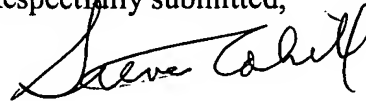
As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no

representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

Applicant believes that no fee is required for submission of this statement.

However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



Steven Cahill
Reg. No. 44,578

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60143441 v1



Substitute for form 1449B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Complete if Known

Application Number	10/731,279
Filing Date	December 8, 2003
First Named Inventor	Pan, Philip
Art Unit	
Examiner Name	
Attorney Docket Number	015114-068000US

Sheet	1	of	
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U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number Number Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-4,034,349	07-05-1977	Monaco et al.	
	AB	US-4,742,452	05-03-1988	Hirokawa	
	AC	US-4,920-539	04-24-1990	Albonesi	
	AD	US-5,222,223	06-22-1993	Webb, Jr. et al.	
	AE	US-5,329,629	07-12-1994	Horst et al.	
	AF	US-5,594,885	01-14-1997	Lautzenheiser	
	AG	US-5,721,857	02-24-1998	Glew et al.	
	AH	US-5,742,831	04-21-1998	Creta	
	AI	US-5,802-555	09-01-1998	Shigeeda	
	AJ	US-5,809,528	09-15-1998	Miller et al.	
	AK	US-6,185,630	02-06-2001	Simmons	
	AL	US-6,279,083	08-21-2001	MacDonald	
	AM	US-6,378,023	04-23-2002	Christie et al.	
	AN	US-6,499,078	12-24-2002	Beckert et al.	
	AO	US-6,519,187	02-11-2003	Wada	
	AP	US-			

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document Country Code ³ Number ⁴ Kind Code ⁵ (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
	AQ					<input type="checkbox"/>

NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	AR		

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.